

Division of Corporations

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TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

KIMBERLYN INVESTMENTS CO.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. KIMBERLYN INVESTMENTS CO.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. NA

(FEI number, if applicable)

4. 7/30/2007

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON FILING

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4675 Ponce de Leon Blvd., Suite 305, Coral Gables, FL 33146

(Principal office address)

4675 Ponce de Leon Blvd., Suite 305, Coral Gables, FL 33146

(Current mailing address)

8. Investments

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Marco Antoniazzi

Office Address: 4675 Ponce de Leon Blvd., Ste. 305

Coral Gables, FL

(City)

Florida 33146

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

/s/ Marco Antoniazzi

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Pablo Antoniazzi

Address: 4675 Ponce de Leon Blvd., Suite 305

Coral Gables, FL 33146

Director: Marco Antoniazzi

Address: 4675 Ponce de Leon Blvd., Suite 305

Coral Gables, FL 33146

B. OFFICERS

President: Marco Antoniazzi

Address: 4675 Ponce de Leon Blvd., Suite 305

Coral Gables, FL 33146

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Martin Antoniazzi

Address: 4675 Ponce de Leon Blvd., Suite 305, Coral Gables, FL 33146

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. /s/ Marco Antoniazzi

(Signature of Director or Officer listed in number 12 of the application)

14. Marco Antoniazzi, Pres.

(Typed or printed name and capacity of person signing application)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KIMBERLYN INVESTMENTS CO." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KIMBERLYN INVESTMENTS CO." WAS INCORPORATED ON THE THIRTIETH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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[Signature]
AUTHENTICATED BY: P002903

DATE: 10-26-09

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